

Standard Form No. 1034—Revised

Form prescribed by
Comptroller General, U. S.
September 7, 1950
(Gen. Reg. No. 51, Supp. No. 1)
(Amended February 20, 1952)

**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

D. O. Vou. No. _____

Bu. Vou. No. _____

U. S. _____

(Department, bureau, or establishment)

Voucher prepared at _____

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. _____

To Thompson Ramo Wooldridge, Inc.

(Payee)

Los Angeles 45, California

(Address)

(City)

(State)

PAID BY

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Voucher nos:					
		2418					
		2419			\$	(4,945	94)
		2420				15,478	18
		2421				16,876	85
		2422				(19,274	69)
		2423				7,788	06
		2431				388,090	31
		2432				(985	89)
		2433				(157	34)
						(250	15)

PAYMENT:
Complete ☐
Partial ☐
Final ☐

Shipped from _____ to _____ Weight _____ Government R/I No. _____

Use continuation sheet(s) if necessary

Approved For Release 2001/08/15 : CIA-RDP64-00360R000600040072-3

31C VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL

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U. S. _____
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				Cost	Per	Dollars	Cts.
		Discount Terms					
		Continued:				1,513	97
		2435				945	31
		2439				13,456	62
		2443				37	62
		2466				60,132	44
		2468					
PAYMENT:							
Complete <input type="checkbox"/>							
Partial <input type="checkbox"/>							
Final <input type="checkbox"/>							
		Use continuation sheet(s) if necessary				Total	
						478,705	35

Shipped from _____ to _____ Weight _____ Government B/L No. _____

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

(Sign original only)

Differences _____

STATINTL

Date _____ *Payee _____
(This certificate not required when a like certificate is made by payee on attached bill or bills)

Amount verified; con _____

478,705 35

(Signature or initials)

Per _____ Title _____

Contract No. A-101

Date _____

Req. No. _____

Date _____

Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for pay

STATINTL

† Approved for \$ _____

SIGN
ORIGINAL
ONLY

By _____

Title _____

Date _____

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ dated _____, 19____, for \$ _____ } on Treasurer of the United States in
{ Cash, \$ _____, on _____, 19____. Payee _____ } favor of payee named above.
(Sign original only)

* When a voucher is signed or completed in the name of a company or corporation, the name of the person writing the company or corporation name, as well as the name of the person signing, must be shown.
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Title _____